

United States Bankruptcy Court Eastern District of California				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Dougherty, Paul Joseph			Name of Joint Debtor (Spouse) (Last, First, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4310			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):		
Street Address of Debtor (No. and Street, City, and State) 4221 W. Prospect Ave. Visalia, CA			Street Address of Joint Debtor (No. and Street, City, and State)		
ZIPCODE 93291			ZIPCODE		
County of Residence or of the Principal Place of Business: Tulare			County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from street address):			Mailing Address of Joint Debtor (if different from street address):		
ZIPCODE			ZIPCODE		
Location of Principal Assets of Business Debtor (if different from street address above):					ZIPCODE
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) 		Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts	
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			Check one box: Chapter 11 Debtors <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000 Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes, in accordance with 11 U.S.C. § 1126(b).		
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-5000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000					
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					

2010-12569

FILED

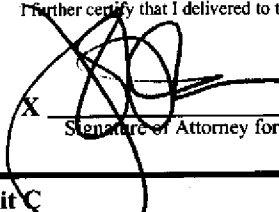
March 12, 2010

2:16 PM

RELIEF ORDERED

CLERK, U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA

0002481116

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Paul Joseph Dougherty	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: NONE	Case Number:	Date Filed:	
Location Where Filed: N.A.	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: Karen Cheri Dougherty	Case Number: 09-18505-A-7	Date Filed: 09/01/2009	
District: Eastern District of California	Relationship: Former Spouse	Judge: Hon. W. Rimel	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b). <div style="text-align: right;">  <div style="display: inline-block; vertical-align: bottom; margin-left: 10px;"> March 8, 2010 Date </div> </div>	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<div style="text-align: center;"> Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No </div>	
<div style="text-align: center;"> Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) </div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. </div>			
<div style="text-align: center;"> Information Regarding the Debtor - Venue (Check any applicable box) </div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. </div>			
<div style="text-align: center;"> Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.) </div> <div style="margin-top: 10px; text-align: center;"> _____ (Name of landlord that obtained judgment) </div> <div style="margin-top: 10px; text-align: center;"> _____ (Address of landlord) </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Debtor claims that under applicable non bankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)). </div>			

Voluntary Petition*(This page must be completed and filed in every case)*

Name of Debtor(s):

Paul Joseph Dougherty

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X Paul J. Dougherty

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 8, 2010

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.

☐

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

Signature of Attorney*

X

Signature of Attorney for Debtor(s)

JOHN P. BIANCO #172075

Printed Name of Attorney for Debtor(s)

BIANCO LAW FIRM

Firm Name

P.O. Box 1088

Address

Visalia, CA 93279-1088

(559) 732-8654

Telephone Number

March 8, 2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

UNITED STATES BANKRUPTCY COURT
Eastern District of California

In re Paul Joseph Dougherty
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: _____

Paul J. Dougherty

PAUL JOSEPH DOUGHERTY

Date: March 8, 2010

Certificate Number: 12459-CAE-CC-008436642

CERTIFICATE OF COUNSELING

I CERTIFY that on September 22, 2009, at 7:32 o'clock PM PDT,

paul dougherty received from

Abacus Credit Counseling,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Eastern District of California, an individual [or group] briefing that complied

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: September 22, 2009

By /s/Laura M Ahart

Name Laura M Ahart

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

United States Bankruptcy Court

Eastern District of California

In re Paul Joseph Dougherty
Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 191,000.00		
B - Personal Property	YES	3	\$ 95,930.00		
C - Property Claimed as exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 262,655.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 1,215.62	
F - Creditors Holding Unsecured Nonpriority Claims	YES	21		\$ 177,548.65	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	2			
I - Current Income of Individual Debtor(s)	YES	1			\$ 3,141.47
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 4,557.00
TOTAL		35	\$ 286,930.00	\$ 441,419.27	

United States Bankruptcy Court

Eastern District of California

In re Paul Joseph Dougherty
Debtor

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 1,215.62
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 1,215.62

State the Following:

Average Income (from Schedule I, Line 16)	\$ 3,141.47
Average Expenses (from Schedule J, Line 18)	\$ 4,557.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 5,273.47

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 71,655.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 1,215.62	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 177,548.65
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 249,203.65

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
House & lot located at 4712 W. Cherry Ct. Visalia, CA	One-half interest		191,000.00	Exceeds Value

Total ➤ 191,000.00

(Report also on Summary of Schedules.)

In re Paul Joseph Dougherty

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking acct. in joint tenancy w/Susan Morse. Sch.B.2. Educational Employees C.U. Visalia, CA		100.00
		Savings acct. in joint tenancy w/Susan Morse. Sch.B.2. Educational Employees C.U. Visalia, CA		25.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		One-half of furniture located on W. Cherry Ct. in Visalia. Sch.B.4.		1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing sufficient for one person. Sch.B.6.		100.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

In re Paul Joseph Dougherty

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X	CalPERS retirement account through debtor's current employer. Sch.B.12.		80,000.00
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.				
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE B - PERSONAL PROPERTY**
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2001 Dodge Ram pick-up truck. Sch.B.25.		5,705.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		Lawsuit settlement proceeds from Centex Homes. Sch.B.35.		8,500.00
0 continuation sheets attached Total				\$ 95,930.00

(Include amounts from any continuation
sheets attached. Report total also on
Summary of Schedules.)

In re Paul Joseph Dougherty

Case No. _____

Debtor

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b)(2)☐ Check if debtor claims a homestead exemption that exceeds \$136,875.☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
House & lot located at 4712 W. Cherry Ct.	C.C.P. 703.140(b)(1) C.C.P. 703.140(b)(5)	0.00 0.00	191,000.00
Checking acct. in joint tenancy w/Susan Morse. Sch.B.2.	C.C.P. 703.140(b)(1) C.C.P. 703.140(b)(5)	0.00 100.00	100.00
Savings acct. in joint tenancy w/Susan Morse. Sch.B.2.	C.C.P. 703.140(b)(1) C.C.P. 703.140(b)(5)	0.00 25.00	25.00
One-half of furniture located on W. Cherry Ct. in Visalia. Sch.B.4.	C.C.P. 703.140(b)(3)	1,500.00	1,500.00
Clothing sufficient for one person. Sch.B.6.	C.C.P. 703.140(b)(3)	100.00	100.00
CalPERS retirement account through debtor's current employer. Sch.B.12.	C.C.P. 703.140(b)(10)(E)	80,000.00	80,000.00
2001 Dodge Ram pick-up truck. Sch.B.25.	C.C.P. 703.140(b)(2) C.C.P. 703.140(b)(5)	3,300.00 2,405.00	5,705.00
Lawsuit settlement proceeds from Centex Homes. Sch.B.35.	C.C.P. 703.140(b)(5)	8,500.00	8,500.00

In re Paul Joseph Dougherty

Case No. _____

Debtor

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0013340045 CitiMortgage, Inc. P.O. Box 6006 The Lakes, NV 88901-6006	X	Security: House & lot located at 4712 W. Cherry Ct. VALUE \$ 191,000.00				5,000.00	5,000.00 This amount based upon existence of Superior Liens
ACCOUNT NO. Quality Loan Service Corp. 2141 5th Avenue San Diego, CA 92101	X	Security: House & lot located at 4712 W. Cherry Ct. VALUE \$ 191,000.00				257,655.00	66,655.00
ACCOUNT NO. VALUE \$							

0 continuation sheets attached

Subtotal > (Total of this page)	\$ 262,655.00	\$ 71,655.00
Total > (Use only on last page)	\$ 262,655.00	\$ 71,655.00

(Report also on
Summary of Schedules)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

B6E (Official Form 6E) (12/07) - Cont.

In re Paul Joseph Dougherty
Debtor

Case No. _____
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**
(Continuation Sheet) Sec. 507(a)(8)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above..)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.								
Internal Revenue Service Fresno Service Center Fresno, CA 93888-0025	X	Consideration: 2008 Federal Tax Due. Debt is in name of both debtor and debtor's ex-wife, Karen C. Dougherty.				1,215.62	1,215.62	0.00
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Subtotal ➤						\$ 1,215.62	\$	\$
(Totals of this page)								
Total ➤						\$ 1,215.62		
(Use only on last page of the completed Schedule E.) Report also on the Summary of Schedules)								
Totals ➤							\$ 1,215.62	\$ 0.00
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								

Sheet no. 1 of 1 continuation sheets attached to Schedule of
Creditors Holding Priority Claims

In re Paul Joseph Dougherty

Case No. _____

Debtor

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Visalia Eye Center # 17214 Access Capital Services PO Box 1511 Visalia, CA 93291		Consideration: Medical Services Collector for Visalia EYE Center. Same as.				0.00
ACCOUNT NO. Paul Dougherty Access Capital Services Inc. 200 East Center Ave Visalia, CA 93291		Second address for Access Capital Svc.				0.00
ACCOUNT NO. Paul Dougherty Access Capital Services Inc. P.O. Box 1511 Visalia, CA 93279	X	Consideration: Medical Services Dental Charges for the period of 2006-2008. In Collections for Megan Ide DDS & Orthopedic Associates 2007-2008.				1,400.00
ACCOUNT NO. 1150130 Access Capital Services Inc. P.O. Box 1511 Visalia, CA 93279		Consideration: Medical Services SAME AS MEGHAN IDE DDS-CREDITOR FOR DDS.				1,250.00
Subtotal						\$ 2,650.00
Total						\$

20 continuation sheets attached

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1148347 Access Capital Services Inc. PO Box 1511 Visalia, CA 93279		Consideration: Medical Services Creditor for Orthopedic Assoc. Same as.				96.98
ACCOUNT NO. 3700 AES/NCT 1200 North 7th Street Harrisburg, PA 19101	X	Consideration: Student Loan 1/2006 Student Loan for Fresno State (\$40,000.00 is approx.)				40,000.00
ACCOUNT NO. 1475008607120 Alan M. Laskin, Attorney 9381 E. Stockton Blvd. Suite 116 Elk Grove, CA 95264		Consideration: Credit Card Debt (Unsecured) Collections Attorney for Cash LLC				0.00
ACCOUNT NO. 4227093881247088 Applied Card Bank Bankcard center PO Box 11170 Wilmington, DE 19850-1170		Incurred: 2004 Consideration: Credit Card Debt (Unsecured)				1,786.50
ACCOUNT NO. 7675 Arrow Financial Services 21031 Network Place Chicago, IL 60678-1031	X	Incurred: 2005 Consideration: Credit Card Debt (Unsecured) Visa# 7675. Original creditor is Bank Of America				3,024.00

Sheet no. 1 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 44,907.48

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4663090001352757 Arrow Financial Services 21031 Network Place Chicago, IL 60678-1031		Incurred: 2005 Consideration: Credit Card Debt (Unsecured) SAME AS ORCHARD BANK/HSBC. CREDITOR FOR ORCHARD BANK/HSBC				1,373.52
ACCOUNT NO. 5458002221184585 Arrow Financial Services 5996 W. Touhy Ave. Niles, IL 60714		Consideration: Credit Card Debt (Unsecured) Second address for creditor for Direct merchants				0.00
ACCOUNT NO. 5458002219235340 Arrow Financial Services LLC 21031 Network Place Chicago, IL 60678-1031	X	Incurred: 2005 Consideration: Credit Card Debt (Unsecured) SAME AS DIRECT MERCHANTS BANK CREDITOR FOR.				842.22
ACCOUNT NO. 5458002221184585 Arrow Financial Services LLC 21031 Network Place Chicago, IL 60678-1031	X	Consideration: Credit Card Debt (Unsecured) Collections for Direct Merchant Bank Mastercard. SAME AS DIRECT MERCHANTS Acct#40896035				3,000.00
ACCOUNT NO. 4791070125887685 Aspire Bank Payment Processing PO Box 23007 Columbus, GA 319025-3007		Consideration: Credit Card Debt (Unsecured) Second address for Aspire Bank				0.00

Sheet no. 2 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 5,215.74

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4791070125887685 Aspire Bank PO Box 105341 Atlanta, GA 30348-5341		Incurred: 2005 Consideration: Credit Card Debt (Unsecured)				696.89
ACCOUNT NO. 35511505 Asset Acceptance LLC P.O. Box 2039 Warren, MI 48090-2039		Consideration: Personal Loan Second address for Asset Acceptance				0.00
ACCOUNT NO. 35511505 Asset Acceptance LLC. PO Box 2036 Warren, MI 48090-2036	X	Incurred: 2005 Consideration: Personal Loan SAME AS HFC/HSBC. CREDITOR FOR HFC/HSBC. ASSET ACCEPTANCE OBTAINED JUDGMENT				31,903.84
ACCOUNT NO. 7675 Bank of America P.O. Box 26012 Greensboro, NC 27420		Consideration: Credit Card Debt (Unsecured) Original Creditor for Visa#4888603106937675. Sold to Arrow Financial Service.				0.00
ACCOUNT NO. Paul Dougherty CAL ER Physicians Med. Group 410 West Mineral King Visalia, CA 93277		Consideration: Medical Services See Finacial Credit Network. Now creditor for CAL ER				0.00

Sheet no. 3 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 32,600.73

Total >

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 804986 Capital Management Services 726 Exchange St. Suite 700 Buffalo, NY 14210		Consideration: Credit Card Debt (Unsecured) Collector for HSBC Card Services. Same as HSBC.				0.00
ACCOUNT NO. Paul Dougherty Care Medical A California Corporation 9644 W. Nicholas Visalia, CA 93291		Consideration: Credit Card Debt (Unsecured)				365.45
ACCOUNT NO. 65207 Care Medical PO Box 19785 Irvine, CA 92623-9785		Consideration: Credit Card Debt (Unsecured) Second address for Care Medical				0.00
ACCOUNT NO. 65207 CARE Medical Corp. PO Box 3223 Visalia, CA 93278		Consideration: Medical Services 2008-2009 Medical				460.00
ACCOUNT NO. Paul Dougherty CareMedical, A California Corp. 1840 S. Central St. Visalia, CA 93277-4418		Consideration: Credit Card Debt (Unsecured) Second address for Care Medical, A california corp.				0.00
Subtotal >						\$ 825.45
Total >						\$

Sheet no. 4 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3597 Cash LLC 370 17th Street, Suite 5000 Denver, CO 80237	X	Consideration: Credit Card Debt (Unsecured) 2004 Visa card 4185-8602-5444-3597. Originally was providian, WAMU, Chase and now sold to Cash LLC.				3,700.00
ACCOUNT NO. Paul Dougherty Charles Boniske, M.D. 5319 W. Hillside Visalia, CA 93291		Consideration: Credit Card Debt (Unsecured) See creditor Financial Credit Network. 2005. \$200.00				0.00
ACCOUNT NO. 6708 Chase Bank One Card Service Westerville, OH 43081	X	Consideration: Credit Card Debt (Unsecured) 4/2003-Credit card-Originally Providian/ WaMu. Attorney - Curtis O Barnes				3,000.00
ACCOUNT NO. 9022 Chase Bank PO Box 15548 Wilmington, DE 19886-5548	X	Consideration: Credit Card Debt (Unsecured) 2007 Mastercard #5401683039649022				5,800.00
ACCOUNT NO. 8532266662 Columbus Bank and Trust c/o Midland Credit Management P.O. Box 60578 Los Angeles, CA 90060-0578						780.00

Sheet no. 5 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 13,280.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05 0353 78292 Credit Collection Services (C.C.S.) PO Box 55126 Boston, MA 02205-5126		Consideration: Insurance Second address for Credit Collections Svcs.				0.00
ACCOUNT NO. 05 0353 78292 Credit Collection Services (C.C.S.) Two Wells Avenue, Dept 9134 Newton, MA 02459		Consideration: Insurance				60.00
ACCOUNT NO. 1400368319690 Curtis O. Barnes, PC Attorney PO Box 1390 Anaheim, CA 92815-1390		Consideration: Credit Card Debt (Unsecured) Collections Attorney for Chase Visa# 4185864587276708 Estimate of \$3,000.00				0.00
ACCOUNT NO. 5458002221184585 Direct Merchant Bank/HSBC PO Box 60136 City of Industry, CA 91716		Incurred: 2007 Consideration: Credit Card Debt (Unsecured) SAME AS ARROW FINANCIAL SVC. CREDITOR FOR DIRECT MERCHANTS				0.00
ACCOUNT NO. 5458002219235340 Direct Merchant Bank/HSBC Po Box 60136 City of Industry, CA 91716		Consideration: Credit Card Debt (Unsecured)				0.00
Subtotal >						\$ 60.00
Total >						\$

Sheet no. 6 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5458002221184585 Direct Merchants Bank PO Box 17151 Baltimore, MD 21297-1151		Consideration: Credit Card Debt (Unsecured) Second address for Direct merchants Bank				0.00
ACCOUNT NO. 50047154 Emergency Medical Services 410 West Mineral King Visalia, CA 93291-6237		Consideration: Medical Services Ryan Dougherty				70.00
ACCOUNT NO. Paul Dougherty Financial Credit Network, Inc. 1300 W. Main St. Visalia, CA 93291		Consideration: Medical Services Second address for Financial Credit Network				0.00
ACCOUNT NO. 7382835 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services REGARDING YOUR CREDITORS.... ACCT#3535474				2,683.64
ACCOUNT NO. 7360189 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services Client Account # 02-79480-Mineral King Radiological				2,662.79

Sheet no. 7 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 5,416.43

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7769250 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services Client account # 4571422				4,304.06
ACCOUNT NO. 7719635 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Acct# 3692989 Creditor for Kaweah Delta Health. Same as.				0.00
ACCOUNT NO. 7588033 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services Ryan Dougherty acct# 3687220				3,966.20
ACCOUNT NO. 7588033 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services Same as Kaweah Delta Health Care. Acct# 3687220				0.00
ACCOUNT NO. 7646029 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services Same as Kaweah Delta Health Care District Account # 3705280				4,000.00
Subtotal >						\$ 12,270.26
Total >						\$

Sheet no. 8 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7645899 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services SAME AS KAWEAH DELTA HEALTH. ACCT # 3691216				0.00
ACCOUNT NO. 7482405 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services Same as Kaweah Delta. Acct # 3580717				2,831.82
ACCOUNT NO. 7262813 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278		Consideration: Medical Services SAME AS KAWEAH DELTA HEALTH CARE. ACCT# 3412580. CREDITOR FOR KAWEAH HEALTH.				2,468.13
ACCOUNT NO. 7645951 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93279		Consideration: Medical Services Same as Kaweah Delta Health. Acct# 3704150				0.00
ACCOUNT NO. 7367450 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93291		Consideration: Medical Services SAME AS KAWEAH DELTA HEALTH CARE. SEE ACCT # 352066. SVCS. FOR RYAN DOUGHERTY				3,106.01
Subtotal >						\$ 8,405.96
Total >						\$

Sheet no. 9 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7382835 Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93277	X	Consideration: Medical Services SAME AS KAWEAH DELTA Acct# 3535474				0.00
ACCOUNT NO. 4791 0701 2588 7685 First National Collection Bureau, Inc. 610 Waltham Way Sparks, NV 89434		Consideration: Credit Card Debt (Unsecured) Additional creditor for Aspire Card. SAME AS P SCOTT LOWERY & ASPIRE				0.00
ACCOUNT NO. 4791070125887685 First National Collection Bureau, Inc. Dept# 21377 PO Box 1259 Oaks, PA 19456		Consideration: Credit Card Debt (Unsecured) Second address for First national collection. SAME AS ASPIRE & ATTORNEY SCOTT LOWERY				0.00
ACCOUNT NO. Paul Dougherty Frances Dougherty 1924 South Royal Oaks Dr. Visalia, CA 93277	X	Consideration: Student Loan Co-Signer on student loan in 2004 & 2006 with AES/NCT & NCO Financial. Totaling \$83,654.00				0.00
ACCOUNT NO. 219400-20-129799-0 HFC/HSBC PO Box 60101 City of Industry, CA 91716-0101		Consideration: Personal Loan SAME AS ACCET ACCEPTANCE. CREDITOR FOR HFC/HSBC				0.00
Subtotal >						\$ 0.00
Total >						\$

Sheet no. 10 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 219400-20-129799-0 HFC/HSBC PO Box 9618 Virginia Beach, VA 23450		Consideration: Credit Card Debt (Unsecured) Second address for HFC/HSBC				0.00
ACCOUNT NO. 5407915018251766 Hollander Law Offices LLC PO Box 105130 Atlanta, GA 30348-5130		Consideration: Credit Card Debt (Unsecured) Attorney for World Wide Asset / HSBC/Household Finance. SAME AS.				0.00
ACCOUNT NO. 5407915018251766 Household bank HSBC Card Services PO Box 80084 Salinas, CA 93912-0084		Consideration: Credit Card Debt (Unsecured) Second address for Household bank				0.00
ACCOUNT NO. 5407-9150-1825-1766 Household Bank Mastercard HSBC Card Services PO Box 60102 City of Industry, CA 91716-0102		Consideration: Credit Card Debt (Unsecured) SAME AS HOLLANDER LAW FIRM. SEE HOLLANDER LAW FIRM				0.00
ACCOUNT NO. 6061 HSBC Card Services PO Box 60102 City of Industry, CA 91716		Consideration: Credit Card Debt (Unsecured) Original Creditor for Visa # 4269320000606061				0.00
Subtotal >						\$ 0.00
Total >						\$

Sheet no. 11 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6429 HSBC Card Services PO Box 60102 City of Industry, CA 91716		Consideration: Credit Card Debt (Unsecured) Original credit for the Mastercard # 5491100005736429				0.00
ACCOUNT NO. 5458002221184585 Hunt and Henriques Attorney at Law 151 Bernal Road, Suite 8 San Jose, CA 95119-1306		Consideration: Credit Card Debt (Unsecured) ATTORNEY FOR ARROW FINANCIAL. SAME AS ARROW FINANCIAL/DIRECT MERCHANTS				0.00
ACCOUNT NO. 3700 JP Morgan Chase Bank 1 East Ohio Street IN1-0102 Indianapolis, IN 46277		Consideration: Student Loan Original Creditor for the student loan (2006)				0.00
ACCOUNT NO. 6657/6665 Juniper Bank Mastercard PO Box 8833 Wilmington, DE 19899		Consideration: Credit Card Debt (Unsecured) Original creditor for Mastercard's - 1. 5140217998986657 2. 5140217998986665				0.00
ACCOUNT NO. Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277		Client's ex-wife.			X	0.00
Subtotal >						\$ 0.00
Total >						\$

Sheet no. 12 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3520366 Kaweah Delta Health Care 201 South Locust Visalia, CA 93291		Consideration: Medical Services SEE CREDITOR FINANCIAL NETWORK. ACCT# 7367450. SVCS. FOR RYAN DOUGHERTY				0.00
ACCOUNT NO. 3580717 Kaweah Delta Health Care 201 South Locust St Visalia, CA 93291		Consideration: Medical Services See creditor Financial Network. Same As. Acct # 3580717				0.00
ACCOUNT NO. 3705280 Kaweah Delta Health Care 201 South Locust St. Visalia, CA 93291		Consideration: Medical Services SEE CREDITOR FINANCIAL CREDIT NETWORK. SAME AS.				0.00
ACCOUNT NO. 3691216 Kaweah Delta Health Care 201 South Locust St. Visalia, CA 93291		Consideration: Medical Services				20.00
ACCOUNT NO. 3535474 Kaweah Delta Health Care 400 W. Mineral King Visalia, CA 93291		Consideration: Medical Services SAME AS Financial Credit Network				160.00
Subtotal >						\$ 180.00
Total >						\$

Sheet no. 13 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3692989 Kaweah Delta Health Care 400 W. Mineral King Visalia, CA 93291		Consideration: Medical Services Incurred for Ryan Dougherty				140.00
ACCOUNT NO. 3412580 Kaweah Delta Health Care 400 West Mineral King Visalia, CA 93291		Consideration: Medical Services SEE FINANCIAL CREDIT NETWORK. ACCT#3412580. SAME AS FINANCIAL CREDIT.				0.00
ACCOUNT NO. 3692989 Kaweah Delta Health Care District 201 S. Locust St. Visalia, CA 93291-6250		Consideration: Medical Services Second address for Kaweah Delta				0.00
ACCOUNT NO. 3704150 Kaweah Delta Health Care District 201 S. Locust St. Visalia, CA 93291-6250		Consideration: Medical Services Ryan Dougherty. See Financial Credit Network. Same As.				33.48
ACCOUNT NO. 3687220 Kaweah Delta Health Care District 201 South Locust St. Visalia, CA 93291		Consideration: Medical Services Ryan Dougherty. 3687220. Also See Financial Credit Network. Same as				475.00
Subtotal >						\$ 648.48
Total >						\$

Sheet no. 14 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3687220 Kaweah Delta Health Care District PO Box 2614 Visalia, CA 93279		Consideration: Medical Services Second address for Kaweah Delta Health Care				0.00
ACCOUNT NO. 65207 (CA-423) Law Offices of Siegel & Siegel Attorney at Law 6355 Topanga Canyon Blvd., #255 Woodland Hills, CA 91367		Collection agency for Care Medical.				0.00
ACCOUNT NO. 6657/6665 LHR, Inc. 56 Main Street Hamburg, NY 14075-4905	X	Consideration: Credit Card Debt (Unsecured) 2005 Credit card charges. Collections for Juniper Mastercard #6657 and #6665. One account with 2 #s.				1,280.95
ACCOUNT NO. 4039 LVNV Funding LLC BK Dept. PO Box 10587 Greenville, SC 29603		Consideration: Credit Card Debt (Unsecured) 6/2004- Credit Card- Original Orchard Bank m/c aka HSBC. Collections-Capital Management Svc.				1,168.46
ACCOUNT NO. 625 Megan Ide DDS 1045 N. Demaree Visalia, CA 93291		Consideration: Medical Services See Access Capital Services. Dental Charges for the period of 2006 through 2008				0.00

Sheet no. 15 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 2,449.41

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4585 Michael S. Hunt, Attorney 151 Bernal Road, Suite 8 San Jose, CA 95119-1306		Consideration: Credit Card Debt (Unsecured) Attorney for Arrow Financial Services				0.00
ACCOUNT NO. 8532266662 Midland Credit Management Dept 12421 PO Box 603 Oaks, PA 19456		Consideration: Credit Card Debt (Unsecured) Second address for Midland Credit. Creditor for Aspire Visa				0.00
ACCOUNT NO. 8532266662 Midland Credit Management PO Box 60578 Los Angeles, CA 90060-0578		Consideration: Credit Card Debt (Unsecured) Collector for ASPIRE VISA				0.00
ACCOUNT NO. 02-79480 Mineral King Radiological 1700 South Court St. Suite F Visalia, CA 93277		Consideration: Medical Services Aka Visalia Imaging- accounts now with Financial Credit Network- SEE FINANCIAL CREDIT NETWORK				0.00
ACCOUNT NO. 84188970 National Action Financial Service PO Box 9027 Williamsville, NY 14231-9027		Consideration: Personal Loan 2006-Personal Loan from Wells Fargo Financial				609.00
Subtotal >						\$ 609.00
Total >						\$

Sheet no. 16 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3700 NCO Financial Systems 507 Prudential Road Horsham, PA 19044	X	Consideration: Student Loan Student Loan 2004 Original Creditor AES				43,654.00
ACCOUNT NO. 4227093881247088 NCO Financial Systems Inc. 1804 Washington Blvd. MailStop 450 Baltimore, MD 21230		Consideration: Credit Card Debt (Unsecured) SAME AS APPLIED BANK. CREDITOR FOR APPLIED BANK Account # CH5981				0.00
ACCOUNT NO. 4227093881247088 NCO Financial Systems Inc. P.O. Box 15630 Dept. 03 Wilmington, DE 19850		Consideration: Credit Card Debt (Unsecured) Second address for Collector for Applied Bank				0.00
ACCOUNT NO. 5340 Northland Group, Inc. P.O. Box 390846 Edina, MN 55439		Consideration: Credit Card Debt (Unsecured) 2005 credit charges. Collection for Direct Merchant Bank Mastercard & Northland Group				0.00
ACCOUNT NO. 4663090001352757 Orchard Bank HSBC Card Services PO Box 60102 City of Industry, CA 91716-0102		Consideration: Credit Card Debt (Unsecured)				0.00

Sheet no. 17 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 43,654.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4663090001352757 Orchard Bank HSBC Card Services PO Box 80084 Salinas, CA 93912-0084		Consideration: Credit Card Debt (Unsecured) Second address for Orchard Bank. See creditor Arrow Financial. Same as.				0.00
ACCOUNT NO. 1-26694 Orthopedic Associates Medical Clinic 325 South Willis Visalia, CA 93291		Consideration: Medical Services Second address for Orthopedic Assoc.				0.00
ACCOUNT NO. 126694 Orthopedic Association Medical Clinic, Inc. PO Box 2632 Visalia, CA 93279		Incurred: 2008 Consideration: Medical Services SAME AS ACCESS CAPITAL SERVICES SEE ACCESS CAPITAL				0.00
ACCOUNT NO. 15215147090115724 P Scott Lowery PC, Attorney 4500 Cherry Creek Dr. South Suite #700 Denver, CO 80246		Consideration: Credit Card Debt (Unsecured) Attorney for Jefferson Capital Systems collections for Aspire Visa				0.00
ACCOUNT NO. 6061 Portfolio Recovery Association PO Box 12914 Norfolk, VA 23541		Consideration: Credit Card Debt (Unsecured) 2005 Visa Credit card. Collections for HSBC Bank				748.05
Subtotal >						\$ 748.05
Total >						\$

Sheet no. 18 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6429 Portfolio Recovery Association PO Box 12914 Norfolk, VA 23541	X	Consideration: Credit Card Debt (Unsecured) 2005 Credit Card. Creditor for HSBC.				847.25
ACCOUNT NO. 7675 Rosen & Loeb, Attorney's 16000 Ventura Blvd. Suite 1150 Encino, CA 91436		Consideration: Credit Card Debt (Unsecured) Attorney's for Arrow Financial Service. B of A Visa #7675. Ref 38876831				0.00
ACCOUNT NO. 19720 The Lifestyle Center 5105 W. Cypress Visalia, CA 93277		Consideration: Credit Card Debt (Unsecured) See creditor Financial Credit Network- \$400.00				0.00
ACCOUNT NO. Case# 08-228688 Thomas M. Ray, Esq. Peck & Ray 1841 Market Street San Francisco, CA 94103		Consideration: Personal Loan Attorney for Asset Acceptance. (HFC/HSBC)				0.00
ACCOUNT NO. 05 0359 50025 Travelers Insurance Co. c/o Credit Collection Services Two Wells Avenue, Dept. 9134 Newton, MA 02459		Also under acct. #05 0365 67235				240.00

Sheet no. 19 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 1,087.25

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Victor Perez Attorney at Law 1304 W. Center Ave. Visalia, CA 93291		Consideration: Attorney's Fees. Attorney for ex-wife, Karen C. Dougherty.			X	0.00
ACCOUNT NO. 17214 Visalia Eye Center 112 N. Akers Street Suite A Visalia, CA 93291		Consideration: Medical Services Sent to collections with Access Capital SVC.				70.00
ACCOUNT NO. Paul Dougherty Visalia Pathology Medical 316 Dunworth Visalia, CA 93292		Incurred: 2008 Consideration: Medical Services				90.00
ACCOUNT NO. 84188970 Wells Fargo Financial PO Box 98798 Las Vegas, NV 89193-8798		Consideration: Credit Card Debt (Unsecured) Original creditor for Personal Loan # 84188970				0.00
ACCOUNT NO. 5407915018251766 Worldwide Asset Purchasing PO Box 50401 Henderson, NV 89016		Incurred: 2005 Consideration: Credit Card Debt (Unsecured) Collector for Household Bank/HSBC. SAME AS Household Bank/Hollander Law Group				2,380.41

Sheet no. 20 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 2,540.41

Total > \$ 177,548.65

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Paul Joseph Dougherty

Case No. _____

Debtor

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re Paul Joseph Dougherty
DebtorCase No. _____
(if known)**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Asset Acceptance LLC. PO Box 2036 Warren, MI 48090-2036
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	CitiMortgage, Inc. P.O. Box 6006 The Lakes, NV 88901-6006
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Quality Loan Service Corp. 2141 5th Avenue San Diego, CA 92101
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Access Capital Services Inc. 200 East Center Ave Visalia, CA 93291
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Access Capital Services Inc. P.O. Box 1511 Visalia, CA 93279
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Arrow Financial Services 21031 Network Place Chicago, IL 60678-1031
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Cash LLC 370 17th Street, Suite 5000 Denver, CO 80237
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Chase Bank One Card Service Westerville, OH 43081

In re Paul Joseph Dougherty
Debtor

Case No. _____
(if known)

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Chase Bank PO Box 15548 Wilmington, DE 19886-5548
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Financial Credit Network, Inc. PO Box 3084 Visalia, CA 93278
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Frances Dougherty 1924 South Royal Oaks Dr. Visalia, CA 93277
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	LHR, Inc. 56 Main Street Hamburg, NY 14075-4905
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	NCO Financial Systems 507 Prudential Road Horsham, PA 19044
Karen Cheri Dougherty 4712 W. Cherry Ct. Visalia, CA 93277	Portfolio Recovery Association PO Box 12914 Norfolk, VA 23541

In re Paul Joseph Dougherty

Case _____

(if known)

Debtor

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: <u>Single</u>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <u>No dependents</u>	AGE(S): _____
Employment:	DEBTOR	SPOUSE
Occupation	<u>Correctional Officer</u>	
Name of Employer	<u>State of California</u>	
How long employed	<u>16 yrs.</u>	
Address of Employer	<u>Dept. of Corrections</u>	<u>N.A.</u>
	<u>Corcoran State Prison</u>	

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ <u>5,178.42</u>	\$ <u>N.A.</u>
2. Estimated monthly overtime	\$ <u>0.00</u>	\$ <u>N.A.</u>
3. SUBTOTAL	\$ <u>5,178.42</u>	\$ <u>N.A.</u>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>1,000.27</u>	\$ <u>N.A.</u>
b. Insurance	\$ <u>460.78</u>	\$ <u>N.A.</u>
c. Union Dues	\$ <u>239.07</u>	\$ <u>N.A.</u>
d. Other (Specify: <u>Retirement</u>)	\$ <u>336.83</u>	\$ <u>N.A.</u>
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>2,036.95</u>	\$ <u>N.A.</u>
6.. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>3,141.47</u>	\$ <u>N.A.</u>
7. Regular income from operation of business or profession or farm (Attach detailed statement)	\$ <u>0.00</u>	\$ <u>N.A.</u>
8. Income from real property	\$ <u>0.00</u>	\$ <u>N.A.</u>
9. Interest and dividends	\$ <u>0.00</u>	\$ <u>N.A.</u>
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>N.A.</u>
11. Social security or other government assistance (Specify) _____	\$ <u>0.00</u>	\$ <u>N.A.</u>
12. Pension or retirement income	\$ <u>0.00</u>	\$ <u>N.A.</u>
13. Other monthly income (Specify) _____	\$ <u>0.00</u>	\$ <u>N.A.</u>
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ <u>0.00</u>	\$ <u>N.A.</u>
15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)	\$ <u>3,141.47</u>	\$ <u>N.A.</u>
16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15)	\$ <u>3,141.47</u>	

(Report also on Summary of Schedules and, if applicable,
on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor states that pay is decreasing due to mandatory furlough days for State employees.

In re Paul Joseph Dougherty
DebtorCase No. _____
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>1,100.00</u>
a. Are real estate taxes included? Yes _____ No <u>✓</u>	
b. Is property insurance included? Yes _____ No <u>✓</u>	
2. Utilities: a. Electricity and heating fuel	\$ <u>225.00</u>
b. Water and sewer	\$ <u>0.00</u>
c. Telephone	\$ <u>30.00</u>
d. Other _____	\$ <u>0.00</u>
3. Home maintenance (repairs and upkeep)	\$ <u>200.00</u>
4. Food	\$ <u>200.00</u>
5. Clothing	\$ <u>150.00</u>
6. Laundry and dry cleaning	\$ <u>50.00</u>
7. Medical and dental expenses	\$ <u>30.00</u>
8. Transportation (not including car payments)	\$ <u>140.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>50.00</u>
10. Charitable contributions	\$ <u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ <u>0.00</u>
b. Life	\$ <u>0.00</u>
c. Health	\$ <u>0.00</u>
d. Auto	\$ <u>0.00</u>
e. Other _____	\$ <u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify) _____	\$ <u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ <u>510.00</u>
b. Other _____	\$ <u>0.00</u>
c. Other _____	\$ <u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$ <u>1,872.00</u>
15. Payments for support of additional dependents not living at your home	\$ <u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ <u>0.00</u>
17. Other _____	\$ <u>0.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)	\$ <u>4,557.00</u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	
None	
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ <u>3,141.47</u>
b. Average monthly expenses from Line 18 above	\$ <u>4,557.00</u>
c. Monthly net income (a. minus b.)	\$ <u>-1,415.53</u>

Paul Joseph Dougherty

In re _____
DebtorCase No. _____
(If known)**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 37 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date March 8, 2010Signature: 
Debtor:

Date _____

Signature: Not Applicable
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition PreparerSocial Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X _____
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT

Eastern District of California

In Re Paul Joseph DoughertyCase No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2010	11,567	YTD Wages through 2/28
2009	66,863	Wages
2008	67,738	Wages

2. Income other than from employment or operation of business

None



State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None



Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTS

AMOUNT
PAID

AMOUNT STILL
OWING

None



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTOR

DATES OF
PAYMENTS

AMOUNT
PAID

AMOUNT STILL
OWING

None



c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTOR

DATES OF
PAYMENTS

AMOUNT PAID

AMOUNT STILL
OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR
AGENCY AND LOCATION

STATUS OR
DISPOSITION

Marriage of
DOUGHERTY,
Karen Cheri v. Paul
Case #09-231978

Dissolution of Marriage

Tulare County Superior Ct.
221 S. Mooney Blvd.
Visalia, CA 93291

Pending.

Asset Acceptance, LLC
v. Paul J. Dougherty,
et al.
Case No. 08-228688

Complaint for Money

Tulare County Superior Ct.
221 S. Mooney Blvd.
Visalia, CA 93291

Dismissed w/o
prejudice 10/2009.

Marriage of
DOUGHERTY,
Susan v. Paul
Case #10-235842

Annulment of Marriage

Tulare County Superior Ct.
221 S. Mooney Blvd.
Visalia, CA 93291

Pending hearing on
3/24/10.

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
PERSON FOR WHOSE BENEFIT
PROPERTY WAS SEIZED

DATE OF
SEIZURE

DESCRIPTION AND
VALUE OF PROPERTY

None



c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTOR

DATES OF
PAYMENTS

AMOUNT PAID

AMOUNT STILL
OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR
AGENCY AND LOCATION

STATUS OR
DISPOSITION

Marriage of
DOUGHERTY,
Karen Cheri v. Paul
Case #09-231978

Dissolution of Marriage

Tulare County Superior Ct.
221 S. Mooney Blvd.
Visalia, CA 93291

Pending.

Asset Acceptance, LLC
v. Paul J. Dougherty,
et al.
Case No. 08-228688

Complaint for Money

Tulare County Superior Ct.
221 S. Mooney Blvd.
Visalia, CA 93291

Dismissed w/o
prejudice 10/2009.

Marriage of
DOUGHERTY,
Susan v. Paul
Case #10-_____

Annulment of Marriage

Tulare County Superior Ct.
221 S. Mooney Blvd.
Visalia, CA 93291

Pending.

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
PERSON FOR WHOSE BENEFIT
PROPERTY WAS SEIZED

DATE OF
SEIZURE

DESCRIPTION AND
VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

☐

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
CREDITOR OR SELLER

DATE OF REPOSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND
VALUE OF PROPERTY

Litton Loan Servicing
c/o Quality Loan Service Corp.
2141 5th Ave.
San Diego, CA 92101

Pending

House & lot located at:
4712 W. Cherry Ct.
Visalia, CA 93277
Value: \$190,000

6. Assignments and Receiverships

None

☒

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS
OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF
ASSIGNMENT
OR SETTLEMENT

None

☒

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS
OF CUSTODIAN

NAME AND LOCATION
OF COURT CASE TITLE
& NUMBER

DATE OF
ORDER

DESCRIPTION AND
VALUE OF PROPERTY

7. Gifts

None



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
---	---	-----------------

9. Payments related to debt counseling or bankruptcy

None



List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
John P. Bianco BIANCO LAW FIRM P.O. Box 1088 Visalia, CA 93279-1088	11/23/2009	\$2,300.00 for attorney's fees & costs. (\$2,001 + \$299 filing fee)

10. Other transfers

None



a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,
RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY
TRANSFERRED AND
VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None



NAME OF TRUST OR OTHER DEVICE

DATE(S) OF
TRANSFER(S)

AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY
OR DEBTOR'S INTEREST
IN PROPERTY

11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS
OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR
DIGITS OF ACCOUNT NUMBER,
AND AMOUNT OF FINAL BALANCE

AMOUNT AND
DATE OF SALE
OR CLOSING

Bank of the West
Visalia Office
2301 S. Mooney Blvd.
Visalia, CA 93277

Checking/Savings acct.
Acct. # ***-***2367
Closing Balance: 0.00

07/13/09

Golden1 Credit Union
P.O. Box 15966
Sacramento, CA 95852

Savings acct.
Acct. # *****867
Closing Balance: 1.00

6/30/2009

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF BANK
OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF
THOSE WITH ACCESS TO BOX
OR DEPOSITORY

DESCRIPTION OF
CONTENTS

DATE OF
TRANSFER OR
SURRENDER, IF ANY

13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE
OF
SETOFF

AMOUNT
OF
SETOFF

14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

NAME AND
ADDRESS OF OWNER

DESCRIPTION AND
VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

4712 W. Cherry Ct.
Visalia, CA 93277

Paul J. Dougherty

2004 to 02/2009

5941 W. Cutler Ct.
Visalia, CA 93277

Paul J. Dougherty

02/2009 to 01/2010

4221 W. Prospect
Visalia, CA 93291

Paul J. Dougherty

01/2010 to present date.

16. Spouses and Former Spouses

None

☐

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Karen Cheri
Dougherty

Susan Dougherty

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

☒

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	--	-------------------	----------------------

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

☒

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	--	-------------------	----------------------

None
☒

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS
OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None
☒

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
------	--	---------	--------------------	-------------------------------

None
☒

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date March 8, 2010

Signature
of Debtor


PAUL JOSEPH DOUGHERTY

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT

Eastern District of California

Paul Joseph Dougherty

In re _____,
DebtorCase No. _____
Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. *(Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)*

Property No. 1	
Creditor's Name: Quality Loan Service Corp. 2141 5th Avenue San Diego, CA 92101	Describe Property Securing Debt: House & lot located at 4712 W. Cherry Ct.
Property will be <i>(check one)</i> : <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)). Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt	

Property No. 2 <i>(if necessary)</i>	
Creditor's Name: CitiMortgage, Inc. P.O. Box 6006 The Lakes, NV 88901-6006	Describe Property Securing Debt: House & lot located at 4712 W. Cherry Ct.
Property will be <i>(check one)</i> : <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)). Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. *(All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)*

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

0 continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my Estate securing debt and/or personal property subject to an unexpired lease.

Date: March 8, 2010

Reg. De

Signature of Debtor

Signature of Joint Debtor

United States Bankruptcy Court

Eastern District of California

In re Paul Joseph Dougherty
Debtor

Case No. _____
(If known)

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

Printed name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X
Signature of Bankruptcy Petition Preparer or officer,
Principal, responsible person, or partner whose Social
Security number is provided above.

Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Paul Joseph Dougherty
Printed Names(s) of Debtor(s)

x Paul J. Dougherty March 8, 2010
Signature of Debtor Date

Case No. (if known) _____

x _____
Signature of Joint Debtor, (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA**

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2.

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. SERVICES AVAILABLE FROM CREDIT COUNSELING AGENCIES

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. A list of approved budget and credit counseling agencies that you may consult is posted on the United States trustee program's web site at www.usdoj.gov/ust. It is also available in the bankruptcy clerk's office. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. A list of approved financial management instructional courses is also available on the United States trustee program's web site (www.usdoj.gov/ust) and the bankruptcy clerk's office. Each debtor in a joint case must complete the course.

2. THE FOUR CHAPTERS OF THE BANKRUPTCY CODE AVAILABLE TO INDIVIDUAL CONSUMER DEBTORS

- a. Chapter 7: Liquidation. Total fee: \$299 (\$245 filing fee + \$39 administrative fee + \$15 trustee surcharge)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

b. Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income. Total fee: \$274 (\$235 filing fee + \$39 administrative fee)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

c. Chapter 11: Reorganization. Total fee: \$1,039 (\$1,000 filing fee + \$39 administrative fee)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

d. Chapter 12: Family Farmer or Fisherman. Total fee: \$239 (\$200 filing fee + \$39 administrative fee)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. BANKRUPTCY CRIMES AND AVAILABILITY OF BANKRUPTCY PAPERS TO LAW ENFORCEMENT OFFICIALS

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and deadlines are listed on Form EDC 2-035, *Required Documents and Fees*, which is posted on the court web site (www.caeb.uscourts.gov).

NOTE

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

United States Bankruptcy Court Eastern District of California

In re Paul Joseph Dougherty

Case No. _____

Chapter 7

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 2,300.00

Prior to the filing of this statement I have received \$ 2,300.00

Balance Due \$ 0.00

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

a. [Other provisions as needed]

Advice with respect to filing bankruptcy, preparation of client's Petition, Schedules and Statement of Affairs; filing of said documents; attendance at the First Meeting of Creditors only.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

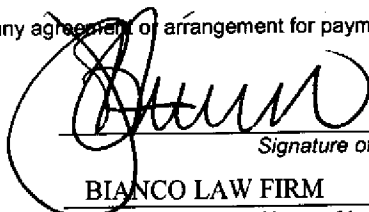
Amendments to client's schedules or other documents; representation for Motion for Relief from Stay, motions to avoid liens or value collateral; continued First Meeting of Creditors or additional meetings of creditors; proceedings to determine dischargeability of a debt or any other adversarial proceedings; representation on appeal or after client's discharge in bankruptcy.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

March 8, 2010

Date



Signature of Attorney

BIANCO LAW FIRM

Name of law firm

In re Paul Joseph Dougherty
Debtor(s)Case Number: _____
(If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

- ☐ The presumption arises.
- ☒ The presumption does not arise.
- ☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS

1A

If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Veteran's Declaration.** By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).

1B

If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Declaration of non-consumer debts.** By checking this box, I declare that my debts are not primarily consumer debts.

1C

Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.

☐ **Declaration of Reservists and National Guard Members.** By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard

- a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and
- ☐ I remain on active duty /or/
- ☐ I was released from active duty on _____, which is less than 540 days before this bankruptcy case was filed;
- OR
- b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/
- ☐ I performed homeland defense activity for a period of at least 90 days, terminating on _____, which is less than 540 days before this bankruptcy case was filed.

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.

a. ☐ Unmarried. **Complete only Column A ("Debtor's Income") for Lines 3-11.**

b. ☒ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."
Complete only Column A ("Debtor's Income") for Lines 3-11.

c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. **Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.**

d. ☐ Married, filing jointly. **Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.**

All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.

**Column A
Debtor's
Income**

**Column B
Spouse's
Income**

3 Gross wages, salary, tips, bonuses, overtime, commissions.

\$ 5,273.47

\$ N.A.

4 Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. **Do not include any part of the business expenses entered on Line b as a deduction in Part V.**

a.	Gross receipts	\$ 0.00
b.	Ordinary and necessary business expenses	\$ 0.00
c.	Business income	Subtract Line b from Line a

\$ 0.00

\$ N.A.

5 Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. **Do not include any part of the operating expenses entered on Line b as a deduction in Part V.**

a.	Gross receipts	\$ 0.00
b.	Ordinary and necessary operating expenses	\$ 0.00
c.	Rent and other real property income	Subtract Line b from Line a

\$ 0.00

\$ N.A.

6 Interest, dividends and royalties.

\$ 0.00

\$ N.A.

7 Pension and retirement income.

\$ 0.00

\$ N.A.

8 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.

\$ 0.00

\$ N.A.

9 Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:

Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ 0.00	Spouse \$ N.A.
---	----------------	----------------

\$ 0.00

\$ N.A.

10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			
	a.	\$ 0.00		
	b.	\$ 0.00		
	Total and enter on Line 10		\$ 0.00	\$ N.A.
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).		\$ 5,273.47	\$ N.A.
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		\$ 5,273.47	
Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.		\$ 63,281.64	
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>California</u> b. Enter debtor's household size: <u>1</u>		\$ 48,140.00	
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. <input type="checkbox"/> The amount on Line 13 is less than or equal to the amount on Line 14. Check the "The presumption does not arise" box at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. <input checked="" type="checkbox"/> The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.			

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)				
16	Enter the amount from Line 12.		\$ 5,273.47	
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.			
	a.	\$		
	b.	\$		
	c.	\$		
	Total and enter on Line 17.		\$ 0.00	
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.		\$ 5,273.47	
Part V. CALCULATION OF DEDUCTIONS FROM INCOME				
Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)				
19A	National Standards: food, clothing and items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		\$ 517.00	

19B	<p>National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years or older. (The total number of household members must be the same as the number stated in Line 14b). Multiply line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Household members under 65 years of age</th> <th colspan="2">Household members 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td style="width: 5%;">a1.</td> <td style="width: 30%;">Allowance per member</td> <td style="width: 10%; text-align: right;">60.00</td> <td style="width: 55%;">a2. Allowance per member 144.00</td> </tr> <tr> <td>b1.</td> <td>Number of members</td> <td style="text-align: center;">1</td> <td>b2. Number of members 0</td> </tr> <tr> <td>c1.</td> <td>Subtotal</td> <td style="text-align: right;">60.00</td> <td>c2. Subtotal 0.00</td> </tr> </tbody> </table>	Household members under 65 years of age		Household members 65 years of age or older		a1.	Allowance per member	60.00	a2. Allowance per member 144.00	b1.	Number of members	1	b2. Number of members 0	c1.	Subtotal	60.00	c2. Subtotal 0.00	\$ 60.00
Household members under 65 years of age		Household members 65 years of age or older																
a1.	Allowance per member	60.00	a2. Allowance per member 144.00															
b1.	Number of members	1	b2. Number of members 0															
c1.	Subtotal	60.00	c2. Subtotal 0.00															
20A	<p>Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$ 365.00																
20B	<p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. TULARE COUNTY</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%;">a.</td> <td style="width: 55%;">IRS Housing and Utilities Standards; mortgage/rental expense</td> <td style="width: 40%; text-align: right;">\$ 736.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>c.</td> <td>Net mortgage/rental expense</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </tbody> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 736.00	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$ 0.00	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$ 736.00							
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 736.00																
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$ 0.00																
c.	Net mortgage/rental expense	Subtract Line b from Line a																
21	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> <p>_____</p> <p>_____</p> <p>_____</p>	\$ 0.00																
22A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.</p> <p><input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 or more. WEST REGION - total includes extra \$200 for 1 old vehicle</p> <p>If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$ 411.00																
22B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$ 0.00																

23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.		
	a.	IRS Transportation Standards, Ownership Costs	\$ 489.00
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$ 0.00
	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a. \$ 0.00
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.		
	a.	IRS Transportation Standards, Ownership Costs	\$ 489.00
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$ 0.00
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a. \$ 0.00
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.		\$ 1,201.71
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.		\$ 572.65
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.		\$ 0.00
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.		\$ 1,872.00
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.		\$ 0.00
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.		\$ 0.00
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.		\$ 51.60
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		\$ 0.00
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32		\$ 5,786.96

Subpart B: Additional Expense Deductions under § 707(b)
Note: Do not include any expenses that you have listed in Lines 19-32.

34	<p>Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.</p> <table border="1"> <tr> <td>a.</td> <td>Health Insurance</td> <td>\$</td> <td>0.00</td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td>\$</td> <td>0.00</td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td>\$</td> <td>0.00</td> </tr> </table>	a.	Health Insurance	\$	0.00	b.	Disability Insurance	\$	0.00	c.	Health Savings Account	\$	0.00	<p>\$ 0.00</p>
a.	Health Insurance	\$	0.00											
b.	Disability Insurance	\$	0.00											
c.	Health Savings Account	\$	0.00											
<p>Total and enter on Line 34.</p> <p>If you do not actually expend this total amount, state your actual average expenditures in the space below:</p> <p>\$ 0.00</p>			<p></p>											
35	<p>Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.</p>	<p>\$ 0.00</p>												
36	<p>Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.</p>	<p>\$ 0.00</p>												
37	<p>Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.</p>	<p>\$ 0.00</p>												
38	<p>Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</p>	<p>\$ 0.00</p>												
39	<p>Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.</p>	<p>\$ 0.00</p>												
40	<p>Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2)</p>	<p>\$ 0.00</p>												
41	<p>Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.</p>	<p>\$ 0.00</p>												

Subpart C: Deductions for Debt Payment

Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total Average Monthly payments on Line 42.

42

	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
a.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
b.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
c.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
			Total: Add Line a, b and c	

\$ 0.00

Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.

43

	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount
a.			\$ 0.00
b.			\$ 0.00
c.			\$ 0.00

\$ 0.00

Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. **Do not include current obligations, such as those set out in Line 28.**

44

\$ 0.00

Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.

45

a.	Projected average monthly Chapter 13 plan payment.	\$ 0.00
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x 10 %
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b

\$ 0.00

Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.

46

\$ 0.00

Subpart D: Total Deductions from Income

Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.

47

\$ 5,786.96

Form 22 Continuation Sheet

	Income Month 1			Income Month 2		
	Gross wages, salary, tips...	4,952.17	0.00	Gross wages, salary, tips...	5,178.42	0.00
	Income from business...	0.00	0.00	Income from business...	0.00	0.00
	Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
	Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
	Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
	Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
	Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
	Other Income...	0.00	0.00	Other Income...	0.00	0.00
	Income Month 3			Income Month 4		
	Gross wages, salary, tips...	5,178.42	0.00	Gross wages, salary, tips...	5,443.95	0.00
	Income from business...	0.00	0.00	Income from business...	0.00	0.00
	Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
	Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
	Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
	Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
	Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
	Other Income...	0.00	0.00	Other Income...	0.00	0.00
	Income Month 5			Income Month 6		
	Gross wages, salary, tips...	5,443.95	0.00	Gross wages, salary, tips...	5,443.95	0.00
	Income from business...	0.00	0.00	Income from business...	0.00	0.00
	Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
	Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
	Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
	Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
	Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
	Other Income...	0.00	0.00	Other Income...	0.00	0.00
Additional Items as Designated, if any						
Remarks						